

THE WALL STREET JOURNAL.

U.S. EDITION

Health

Studies Look at Interruption in Taking AIDS Medicines

By Mark Schoofs

Staff Reporter of The Wall Street Journal

857 words

7 February 2001

The Wall Street Journal

J

B11

English

(Copyright (c) 2001, Dow Jones & Company, Inc.)

CHICAGO -- One of the hottest issues at a major AIDS conference held here this week is whether patients can safely stop taking their AIDS medications and whether doing so can actually boost the immune system enough to control HIV without drugs.

Several studies reported yesterday suggested the "treatment interruption" approach can work in some patients. But those same studies also showed that many trial subjects -- at least half -- fail to achieve this result. Furthermore, most patients with the best outcomes were treated very soon after getting infected.

"How relevant is that for the 99.9% of patients who are chronically infected?" asked Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases, who is familiar with the research.

Interest in stimulating the immune system, rather than merely attacking the virus, has grown since the AIDS-drug cocktails first came out in 1996. At that point, some scientists hoped that just hammering the virus with the drugs would eradicate HIV from the body, curing patients. But the discovery that HIV can hide out for many years in certain cells has dashed those hopes. As a result, researchers are intensifying efforts to supercharge the immune system so patients might be able to stop taking drugs.

Much of the excitement in this topic has been generated by the work of Harvard researcher Bruce Walker, who was the subject of a page one story in The Wall Street Journal last September. Building on the knowledge that HIV cripples the immune system very quickly, Dr. Walker has developed the following hypothesis: If patients could be treated very early, then maybe the immune system, sheltered from the onslaught of the virus, might be able to develop a strong counterattack and gain the upper hand.

But this approach has been very controversial. Yesterday, Martin Markowitz of the Aaron Diamond AIDS Research Center in New York reported on 15 newly infected patients who, on their own, stopped taking their medication. Only three of those patients were able to keep their virus at low levels. Two of them carry a genetic trait known to help people naturally resist HIV.

For those patients who didn't control the virus, the consequences were sobering. They suffered declines in key immune-system agents called CD4 cells, indicating severe damage. Indeed, in just one year off therapy, these patients lost the immune-system improvements that had taken them an average of more than two and a half years to gain on therapy.

These results were much less optimistic than those reported by Dr. Walker at the conference. But in one respect, the results from the two researchers were similar. After a single cessation of therapy, Dr. Walker found that four of 14 patients were able to keep their virus in check. That isn't much different from Dr. Markowitz's experience in which three of 15 patients kept their virus under control.

But after additional cycles on and off therapy, three more patients in Dr. Walker's study were able to control HIV. In total, half of Dr. Walker's patients are controlling their virus without drugs. Dr. Walker compares the additional times off therapy to vaccine booster shots, allowing the immune system to practice fighting HIV.

Interestingly, Dr. Walker also found that after a second interruption of therapy, patients were able to control their virus for much longer than they had after their first interruption, suggesting an improvement in the immune response can occur after successive cycles on and off therapy. On average, patients controlled their

virus for six months after the second treatment interruption, compared with just one month of virus control achieved after the first time these patients stopped taking their drugs.

Some of the patients who underwent successive interruptions are still off medication. Dr. Walker said an unanswered question is how long the immune system can control the virus without assistance from drugs. Given all the uncertainty, he cautioned that "there is no role for this in clinical practice" at this time.

Another study from the National Institute of Allergy and Infectious Diseases didn't try to stimulate the immune system to control HIV on its own, but rather attempted to see if patients could do as well on intermittent therapy as patients on nonstop therapy. The goal of this experiment is to reduce the amount of time patients have to take drugs, thus potentially alleviating side effects.

In the small pilot study conducted by Dr. Fauci, patients were put on a cycle of one week on medication, one week off. The patients who have been studied for as long as 11 months show no sign of developing drug resistance, a major worry, nor do they show any damage to their immune system. "We need to do more patients," said Dr. Fauci in an interview, "but so far it looks good. So at the end of the year, if we continue to be successful, we'll be able to say that patients were able to be on drugs for half the [normal] amount of time."

Document j000000020010711dx27003j6

Search Summary

Text	Studies look at interruption in taking AIDS medicines
Date	20010101 to 20020101
Source	All Publications Or All Web News Or All Blogs
Author	All Authors
Company	All Companies
Subject	All Subjects
Industry	All Industries
Region	All Regions
Language	English
Results Found	1
Timestamp	23 February 2019 2:39 PM